

**California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form
Statewide, County and Hospital of Occurrence by Infant Race/Ethnicity: 2004**

	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
State	CALIFORNIA	African-American	26,141	18,314	7,981	70.1	30.5
State	CALIFORNIA	American Indian	542	415	249	76.6	45.9
State	CALIFORNIA	Asian	43,553	36,557	17,422	83.9	40.0
State	CALIFORNIA	Hispanic	270,248	225,842	78,303	83.6	29.0
State	CALIFORNIA	Multi-Race/Other	31,438	26,345	16,127	83.8	51.3
State	CALIFORNIA	Pacific Islander	788	538	216	68.3	27.4
State	CALIFORNIA	White	144,335	125,905	89,126	87.2	61.8
State	CALIFORNIA	Missing	4,514	3,537	2,014	78.4	44.6
State	CALIFORNIA	TOTAL	521,559	437,453	211,438	83.9	40.5
County	VENTURA	African-American	109	85	35	78.0	32.1
County	VENTURA	Asian	396	364	138	91.9	34.9
County	VENTURA	Hispanic	6,219	5,435	1,966	87.4	31.6
County	VENTURA	Multi-Race/Other	330	301	173	91.2	52.4
County	VENTURA	White	3,683	3,287	2,185	89.3	59.3
County	VENTURA	Missing	49	43	21	87.8	42.9
County	VENTURA	TOTAL	10,794	9,522	4,519	88.2	41.9
Facility	COMMUNITY MEMORIAL HOSPITAL	African-American	40	30	15	75.0	*
Facility	COMMUNITY MEMORIAL HOSPITAL	Asian	88	79	46	89.8	52.3
Facility	COMMUNITY MEMORIAL HOSPITAL	Hispanic	1,980	1,687	945	85.2	47.7
Facility	COMMUNITY MEMORIAL HOSPITAL	Multi-Race/Other	87	78	54	89.7	62.1
Facility	COMMUNITY MEMORIAL HOSPITAL	White	1,184	1,078	891	91.1	75.3
Facility	COMMUNITY MEMORIAL HOSPITAL	TOTAL	3,390	2,963	1,960	87.4	57.8
Facility	LOS ROBLES REGIONAL MEDICAL CENTER	Asian	116	111	51	95.7	44.0
Facility	LOS ROBLES REGIONAL MEDICAL CENTER	Hispanic	362	329	112	90.9	30.9
Facility	LOS ROBLES REGIONAL MEDICAL CENTER	Multi-Race/Other	103	97	53	94.2	51.5
Facility	LOS ROBLES REGIONAL MEDICAL CENTER	White	1,343	1,200	749	89.4	55.8
Facility	LOS ROBLES REGIONAL MEDICAL CENTER	TOTAL	1,942	1,753	970	90.3	50.0
Facility	SIMI VALLEY ADVENTIST HOSPITAL	Asian	48	46	12	95.8	*
Facility	SIMI VALLEY ADVENTIST HOSPITAL	Hispanic	183	159	54	86.9	29.5
Facility	SIMI VALLEY ADVENTIST HOSPITAL	Multi-Race/Other	30	29	13	96.7	*
Facility	SIMI VALLEY ADVENTIST HOSPITAL	White	311	269	133	86.5	42.8
Facility	SIMI VALLEY ADVENTIST HOSPITAL	TOTAL	578	507	214	87.7	37.0
Facility	ST JOHN'S PLEASANT VALLEY HOSPITAL	Hispanic	134	118	75	88.1	56.0

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	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
Facility	ST JOHN'S PLEASANT VALLEY HOSPITAL	Multi-Race/Other	40	36	28	90.0	70.0
Facility	ST JOHN'S PLEASANT VALLEY HOSPITAL	White	286	264	226	92.3	79.0
Facility	ST JOHN'S PLEASANT VALLEY HOSPITAL	TOTAL	496	450	350	90.7	70.6
Facility	ST JOHNS REGIONAL MEDICAL CENTER	African-American	42	32	10	76.2	*
Facility	ST JOHNS REGIONAL MEDICAL CENTER	Asian	101	90	10	89.1	*
Facility	ST JOHNS REGIONAL MEDICAL CENTER	Hispanic	1,756	1,531	261	87.2	14.9
Facility	ST JOHNS REGIONAL MEDICAL CENTER	Multi-Race/Other	53	48	20	90.6	37.7
Facility	ST JOHNS REGIONAL MEDICAL CENTER	White	337	302	112	89.6	33.2
Facility	ST JOHNS REGIONAL MEDICAL CENTER	TOTAL	2,311	2,022	418	87.5	18.1
Facility	VENTURA COUNTY MEDICAL CENTER	Hispanic	1,803	1,610	518	89.3	28.7
Facility	VENTURA COUNTY MEDICAL CENTER	White	221	173	73	78.3	33.0
Facility	VENTURA COUNTY MEDICAL CENTER	TOTAL	2,075	1,825	605	88.0	29.2

Data Source: Genetic Disease Branch, Newborn Screening Data, 2004

Note 1: Data shown only for facilities listed as 'Regular Maternity', 'Kaiser', 'Alternative Birth Center', 'Pediatric', and 'Military' in the newborn screening database.

Note 2: Infant race/ethnicity is based upon mother and father race/ethnicity as recorded on the birth certificate.

Note 3: Data for facilities and counties with fewer than 25 total births with known type of feeding are not shown.

Note 4: Percents of any and exclusive breastfeeding are not shown for fewer than 20 events.

Note 5: Numbers of any and exclusive breastfeeding are not shown for fewer than 5 events.

Note 6: "Any Breastfeeding" includes those exclusively breastfeeding and those supplementing breastfeeding with formula. "Exclusive Breastfeeding" includes those who breastfeed only.

Note 7: Breastfeeding initiation rates vary widely by maternal characteristics. Data presented in these tables are not risk adjusted. Comparisons between facilities or among geographic locations should be made cautiously.

Note 8: The data used to develop these tables are from the California Newborn Screening Program database of the Genetic Disease Branch. All nonmilitary hospitals are required to complete the Newborn Screening Test Form (DHS 4409) prior to an infant's discharge. Upon completing the form, staff must select one of the following five categories describing 'all feedings since birth' (not including water feedings): (1) Breast only; (2) Formula only; (3) Breast and Formula; (4) TPN/Hyperal and (5) Other.

Note 9: The denominator used to compute the percent any and percent exclusive breastfeeding data is "Total Known Feeding". Births with missing or unknown method of feeding are excluded. In 2004, 2.78% of all births in California had missing or unknown feeding data.